SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERIJIT **BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received)

NOV 17 2021

Bayfield Co

Permit #: 26	1-0170	E E
Date: 7-2	7-2022	
Amount Paid:		0-21 FILS
Other:		scroidy Deci
Refund:		

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION <u>UNTIL ALL PERMITS HAVE BEEN ISSUED</u> TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL) TYPE OF PERMIT REQUESTED ☐ LAND USE SANITARY | PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. OTHER Owner's Name: Mailing Address: City/State/Zip: Telephone: 715817-0073 1578 S. Marsikkd w154849 lason +(Address of Property: Cell Phone: Email: (print clearly) sikorski0073@gmail.com 817-0072 Contractor: Contractor Phone: Plumber: Plumber Phone: Authorized Agent: (Person Signing Application on behalf of Agent Mailing Address (include City/State/Zip): Agent Phone: Owner(s)) Required (for Agent) Recorded Document: (Showing Ownership) 2021R 586974 Tax ID# PROJECT Legal Description: (Use Tax Statement) LOCATION 35593 2021R Gov't Lot Vol & Page Lot(s) CSM CSM Doc# Lot(s) # Subdivision: Block # 1/4, 1/4 3 V. 10 P.9 Town of: Lot Size Acreage Section , Township N, Range ☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Distance Structure is from Shoreline: Is your Property Are Wetlands Creek or Landward side of Floodplain? in Floodplain If yes---continue --> feet Present? ☐ Shoreland Zone? Is Property/Land within 1000 feet of Lake, Pond or Flowage Yes Distance Structure is from Shoreline: Yes If ves---continue -696 X No × No Non-Shoreland Value at Time Total # of What Type of Type of of Completion **Project Project** bedrooms Sewer/Sanitary System(s) Water Project # of Stories Foundation on Is on the property or donated time on Will be on the property? & material property property □ New Construction 1-Story Basement 1 Municipal/City ☐ Citv * (New) Sanitary Specify Type: Septic Rech Lield 1-Story + ☐ Addition/Alteration 500. ☐ Foundation 2 X Well Loft ☐ Sanitary (Exists) Specify Type: □ Conversion ☐ 2-Story □ Slab □ 3 ☐ Relocate (existing bldg) Privy (Pit) or Uaulted (min 200 gallon) ☐ Run a Business on Portable (w/service contract) Use None Property Year Round □ Compost Toilet Deck front None Existing Structure: (if addition, alteration or business is being applied for) Length: Width: Height: Proposed Construction: (overall dimensions) 10 10 Square Proposed Use **Proposed Structure Dimensions Footage** Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.) Х 1416 with Loft Residential Use X) with a Porch Х) with (2nd) Porch X with a Deck 0 X I) 0 100 with (2nd) Deck ☐ Commercial Use with Attached Garage X) **Bunkhouse** w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities) X) Mobile Home (manufactured date) (X) Addition/Alteration (explain) ☐ Municipal Use X) (Accessory Building (explain) (X) Accessory Building Addition/Alteration (explain) (X) Special Use: (explain)) Conditional Use: (explain) X) Other: (explain) FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):

(If there are Multiple Duncer lists it...) X

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Address to send permit

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: (1)

Proposed Construction

(2)Show / Indicate: (3)Show Location of (*): North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(4)Show:

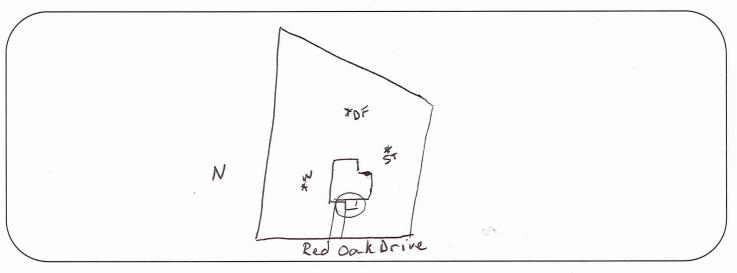
(*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property

(5) Show:

Show any (*): (6)

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

Show any (*): (*) Wetlands; or (*) Slopes over 20% (7)



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setbac Measurem			Description	Setback Measurements	
Setback from the Centerline of Platted Road	127	Feet		Setback from the Lake (ordinary high-water mark)	696	Feet
Setback from the Established Right-of-Way		Feet		Setback from the River, Stream, Creek		Feet
				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	48	Feet	H I		1987	
Setback from the South Lot Line	101	Feet	15 k	Setback from Wetland	634	Feet
Setback from the West Lot Line	93	Feet		20% Slope Area on the property	☐ Yes ☐	No
Setback from the East Lot Line	102	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	45	Feet	H	Setback to Well		Feet
Setback to Drain Field		Feet				
Setback to Privy (Portable, Composting)		Feet				

Prior to the placement or construction of a structure within ten (10) feet of the m inimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits. If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 3	67578	# of bedrooms:	Sanitary Date: 5/23/01
Permit Denied (Date):	Reason for Denial:		auto am a letabar i	
Permit #: 22-0170	Permit Date: 7 - 6	27-2022	}	
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recondance	ous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached ☐ Yes
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by Pres Pres Pres	y Variance (B.O.A.) Cas	e#:
Was Parcel Legally Created Was Proposed Building Site Delineated Wes □ No No		Were Property Line	es Represented by Owner Was Property Surveyed	
Inspection Record:			Street and the	Zoning District (\$ -/)
		,11		Lakes Classification () () ()
Date of Inspection: 7/7/22	Inspected by:	Melr	randistant sellen en gran mittel	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Atta			iched.)	
Builbas propose	96 19/20	make the town		A. E. mark. D. service.
Get UPC inspect	ions it re	quired		
Signature of Inspector:				Date of Approval: 7/14/22
Hold For Sanitary: Hold For TBA:	Hold For Affin	davit: 🗌	Hold For Fees:	

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY - Existing (# 367578) SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Jason & Cindy Sikorski 22-0170 Issued To: No. Town of **Barnes** Location: $\frac{1}{4}$ of Section Township 45 Range 9 W. 1664 CSM# Gov't Lot **Block** Subdivision Lot IN V.10 P.9 IN DOC 2021R-586974

Residential Structure in R-1 zoning district For: Add/Alt: Deck (10' x 10') = 100 sq. ft.

Condition(s): A Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction (if applicable). Meet and maintain setbacks as approved including eaves and overhangs. Build as proposed.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler, AZA

Authorized Issuing Official

July 27, 2022

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

JUN 0.6 2022

Bayfield Co.
Planning and Zoning Agency

Date: **Amount Paid:** Other: Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

(If there are Multiple Owners listed on the Deed All Owners must sign

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

N. OHLLEY AVE

Authorized Agent:

TYPE OF PERMIT F	REQUESTE	D 👆 🗆 LAN	ND USE SANITA	RY PRIVY C	CONDITIONAL US	E X SPECIAL U	SE B.O.A	. OTHE	R
Owner's Name:	KFUY	THOMPS	Mailing 2012	3 N. OAKLE	YAVE	ity/State/Zip:	2 6061	0	phone:
Address of Propert	v:	THE RESERVE	Cit	v/State/7in·	All they			0 77	3 600 9893
3557 TW	INBM			solon spr	INGS, W	I 5487	3	Cell	Phone:
Email: (print clear	(A) DE	3thompso	n@ gmail.	com			2		
Contractor:	,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ctor Phone:	Plumber:			Plum	nber Phone:
Authorized Agent: Owner(s))	(Person Sign	ing Application on beh	alf of Agent I	Phone:	Agent Mailing Ad	Idress (include City/	State/Zip):		tten Authorization quired (for Agent)
PROJECT LOCATION	egal Descr	iption: (Use Tax S		1980			Recorded Docu		
1/4,	1/4	Gov't Lot				# Block #	Subdivision:		V
Section	_ , Townsh	nip N, Ra		Town of:			Lot Size		creage + . 4
4-					Distance Struc	cture is from Shor			Are Wetlands
☐ Shoreland _			1000 feet of Lake, Po	nd or Flowage			eline :	Zone? Ves	Present? Ves
□ Non-				yescontinue>				No	□ No
Shoreland			the second		100	+ 1001 10 0°	120000		-
Value at Time		144			Total # of		What Toma		
of Completion		Droject	Project	Project	bedrooms	Sewe			Type of Water
donated time	Lot(s) # Block # Subdivision: Lot(s) # Block # Subdivision: Lot(s) # Block # Subdivision: Lot Size Lot(s) # Lot Size Lot(s) # Lot Size Lot S	on							
& material				MANAGEMENT.	property	Will	oe on the pro	perty?	propert
	□ New	Construction		☐ Basement					☐ City
\$ 440 and	□ Addi	tion/Alteration	A = 70	☐ Foundation	□ 2	po dile			₩Well
	□ Conv	ersion	□ 2-Story	□ Slab	☑3				
	Calvaria	ng bldg)	to a transfer of			0			allon)
	Drop	on athacknust i		Use	□ None		/service contra	act)	
	Prop	The basions for all	No. of the second	☐ Year Round		☐ Compost To	oilet		
			0.1						
		lition, alteration or l		, ,	21	Width:	,	Height:	11.1
Troposcu cons	oci decion.	(Overall difficults)	ons)	Length: (05	Width: 50	0'	Height:	16.
Proposed I	Use	1		Proposed Struct	ure		Dime	ensions	Square
		☐ Principa	al Structure (first st	tructure on property)		(x)	Footage
	en i	☐ Resider	nce (i.e. cabin, hunt	ing shack, etc.)	il in or	tin Sea - 1	163	x 56)	
Residentia	al Use		with Loft	The state of the s		THE PERSON		X)	
			with a Porch			le ref		x 12)	
1,375	X I		with (2 nd) Porc	n .				X)	
		100000	with (2 nd) Decl	,				X)	
□ Commerci	ial Use		with Attached		7.47	8		X)	
		☐ Bunkho		or sleeping quarters	s or a cooking o	food prep facilities		x)	(30)
	100			d date)				X)	
☐ Municipal	Use			n)		CT. F.		x)	
unicipal			ory Building (explain				•	x)	
				n/Alteration (explain	n)			x)	
	His.		Use: (explain)	THE PARTY IN				x)	
			onal Use: (explain)					X)	
		Conditi							
		,	(explain) SHOR	IT TERM R	LATTO		. (X)	1.700

Copy of Tax Statement If you recently purchased the property send your Recorded Deed

on must accompany this application)

(See Note below)

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: (1)

Proposed Construction

Show / Indicate: (2)

North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(3)Show Location of (*): (4)Show:

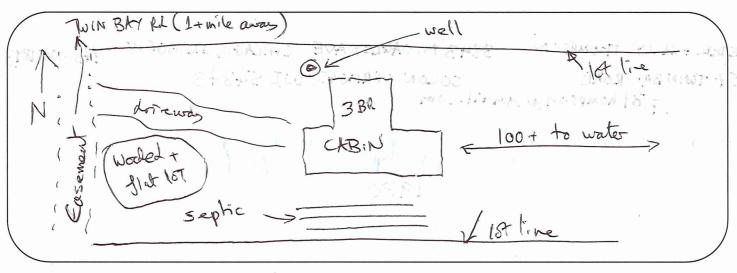
(*) **Driveway** and (*) **Frontage Road** (Name Frontage Road) All Existing Structures on your Property

(5) Show: (6)

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

Show any (*): (*) Wetlands; or (*) Slopes over 20% (7)



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Setback Measurements		Description	Setback Measurements
Setback from the Centerline of Platted Road	Feet		Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet		Y	
Setback from the South Lot Line	Feet		Setback from Wetland	Feet
Setback from the West Lot Line	Feet	100	20% Slope Area on the property	☐ Yes ☐ No
Setback from the East Lot Line	Feet		Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet		Setback to Well	Feet
Setback to Drain Field	Feet			
Setback to Privy (Portable, Composting)	Feet	die.		

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

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The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

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Issuance Information (County Use Only)	Sanitary Number:	21-515	# of bedrooms: 3	Sanitary Date:	5/21/21
Permit Denied (Date):	Reason for Denial:		and (mg) dates		
Permit #: 22 - 0173	Permit Date: 7-	28-2022	3		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming ☐ Yes (Deed of Record ☐ Yes (Fused/Contigu	ous Lot(s))	Mitigation Required Mitigation Attached	Yes No	Affidavit Required Affidavit Attached	Yes No
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #.		Previously Granted by	y Variance (B.O.A.) Case	e #:	
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No		Were Property Line	es Represented by Owner Was Property Surveyed	Yes	□ No
Inspection Record:		1		Zoning District Lakes Classificatio	(R-3)
Date of Inspection: 7/7/21	Inspected by:	SY		Date of Re-Inspec	ction:
Condition(s): Town, Committee or Board Conditions Attain - Maintain license w Public - MAT Occupancy 3 Bedroom	ched? I Yes I No-(If Health + Hood /s/eep,'ng are	No they need to be atta on Tax of concess based or	scotte sizing	the town	brogs Subscolle
Signature of Inspector:	en			Date of Appro	oval: 7/14/22
Hold For Sanitary: 🗆 Hold For TBA: 🗅 _	Hold For Affi	davit: 🗆	Hold For Fees:		

®®January 2000

TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 – Washburn, WI 54891 Phone – (715) 373-6138

Fax - (715) 373-0114

e-mail: zoning@bayfieldcounty.wi.gov

Website: www.bayfieldcounty.wi.gov

Date Zoning Received:	(Stamp Here)

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 ½ x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s). Property Owner PETER + KELLY THOMPSON Contractor Property Address 3557 TWIN BAY ROAD Authorized Agent SOLON SPRINGS, WI54873 Agent's Telephone Telephone 773 600 9893 Written Authorization Attached: Accurate Legal Description involved in this request (specify only the property involved with this application) __1/4 of ______1/4, Section 16, Township 44 N., Range 09 W. Town of BARNES Govt. Lot _____Lot ____ Block _____ Subdivision _ CSM# 1360 Volume Page 179 of Deeds Tax I.D# ____ 1980 Acreage 4.4 Additional Legal Description: Applicant: (State what you are asking for) Zoning District: Lakes Classification SHORT TERM RENTAL PERMIT We, the Town Board, TOWN OF , do hereby recommend to ■ Table **Approval** □ Disapproval Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: No Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval) Signed: ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: Chairman: The Tabled, Approval or Disapproval box checked The Town's reasoning for the tabling, approval or disapproval The form returned to Zoning Department not a copy or fax Supervisor ** NOTE: Supervisor Receiving Town Board approval, does not allow the start

Revised: November 2017

of construction or business, you <u>must</u> first obtain your permit card(s) from the Planning and Zoning Department.

LUPC Minutes

Land Use Plan Commission Meeting Meeting called to order at 4:00 on June 14, 2022

Absent: Bill Webb, Diane Rupnow

In Attendance: Jeff Johnson, Greg Strasser, Seana Frint Karl Kastrosky to represent Sundquist.

Public comment session: K Kastrosky updated on possible future of trailer park. Nothing set in stone yet but owners are hoping to re-do water/septic, clean-up/tear down and put up a few single housing units to rent and/or mini-storage. Ideas are still being debated.

Peter and Kelly Thompson 3557 Twin Bay Rd Class A Special Use application for short term rental. Motion by Johnson to approve. 2nd by Frint. Discussion: Fits in with land use plan. Septic and setbacks ok. County is getting a little fussier about applications being 100% filled out. Box with question "Are wetlands present" not checked so the county may send the application back to be done again. Motion carries.

Kelby and Whitney Sundquist 55945 Island Dr Class A Special Use application for short term rental. Motion to approve by Johnson. 2nd by Frint. Septic and setbacks ok. Fits in with land use plan. Motion carries.

Meeting adjourned. 4:20

Application Number 04012102-2021

Project Type Residential

Square Footage 3150 sq. ft

Description New Construction

Application Date Apr 1, 2021

Permit Status Permit Issued

Property Details Contact Info	Fees Project Review	Setbacks	Comments Issuance	Info Timeline	
Setback	Submitted	Final	Status	Compliance	Comments
North Lot Line	59.13 ft		Confirmed	Yes	
South Lot Line	76.17 ft		Confirmed	Yes	
East Lot Line	328.31 ft		Confirmed	Yes	
West Lot Line	300.91 ft		Confirmed	Yes	
Centerline of Platted Road	0 ft	40 ft	Corrected	Yes	Resolved
River Stream Creek or Lake	454.88 ft		Confirmed	Yes	
Wetland	134.15 ft		Confirmed	Yes	
Sanitary	0 ft	25 ft	Corrected	Yes	
Well	30.39 ft		Confirmed	Yes	
Established Right-of-Way	o ft	40 ft	Corrected	Yes	

Edit



Structures - Inspection Status

Needs Inspection

Inspected

Incomplete Inspection

Survey Required

Parcels

Real Estate Bayfield County Property Listing

Today's Date: 7/15/2022

Property Status: Current

Created On: 3/15/2006 1:14:46 PM

Description	Updated: 12/29/202
Tax ID:	1980
PIN:	04-004-2-44-09-16-1 05-002-90000

004110908991

Legacy PIN: Map ID:

(004) TOWN OF BARNES

Municipality: STR: S16 T44N R09W

Description: LOT 3 CSM #1360 IN V.8 P.179 (LOCATED IN GOVT LOT 2 & SE NW) (PRIVATE WATERBED NOT INCLUDED) IN DOC 2020R-586231 TOG WITH &

SUBJ TO EASE

Recorded Acres: 4.430 Calculated Acres: 4.406 Lottery Claims: 0

First Dollar: Yes (R-3) Residential-3 Zoning:

ESN: 104

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
004	TOWN OF BARNES
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE

ľ	Recorded Documents	Updated: 3/15/2006

WARRANTY DEED

2020R-586231 Date Recorded: 12/23/2020

CONVERSION

500054 914-789;920-854 Date Recorded:

■ WARRANTY DEED

2005R-500054 Date Recorded: 6/24/2005

□ LAND CONTRACT

Date Recorded: 3/30/2005 2005R-498261

Ⅲ CERTIFIED SURVEY MAP

Date Recorded: 3/2/2005 2005R-497838 8-170 Ownership

CHICAGO IL 60618

Updated: 12/29/2020

PETER & KELLY THOMPSON

CHICAGO IL

Billing Address: PETER & KELLY THOMPSON 3843N OAKLEY AVE

Mailing Address: PETER & KELLY THOMPSON

3843N OAKLEY AVE CHICAGO IL 60618

Site Address * indicates Private Road

3557 TWIN BAY RD **SOLON SPRINGS 54873**

Property Assessment Updated: 3/25/2022 2022 Assessment Detail Acres Land Imp. Code 4.430 60,000 22,100 **G1-RESIDENTIAL** 2-Year Comparison 2021 2022 Change 60,000 Land: 60,000 0.0% Improved: 0 22,100 100.0% Total: 60,000 82,100 36.8%



Property History

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE – X Shoreland/Wetland SIGN – SPECIAL – A (Tn of Barnes-6/21/2022) CONDITIONAL – BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

BUA -													
No.	22-0173	Issued	d To: P	eter 8	k Kelly Th	omps	son						
_ocation:	½ of	1/4	Section	16	Township	44	N.	Range	9	W.	Town of	Barnes	
Gov't Lot N V.8 P.17	Lot '9 IN DOC 202			lock G WIT I		Subdiv J TO				C	CSM#	1360	
esidential	Use in R-3 zo	nina di	strict										
			061106										
For: (1-Unit	:) Short Term I			ing 1-9	Story Res	idenc	e (6	3' x 50	6'), C	Cove	red Pord	ch (16' x 12');	Height '
or: (1-Unit	t) Short Term I	Rental o	of existi		Story Res								Height '
) Short Term I (Disc	Rental of tall (called a laimer): ted as a	Any futu 3-bedr	re expa	nsions or de residence	velopm . Con	ent w	ould rec	quire a	addition	nal permitt		
Condition(s	s) Short Term I (Discons): To be rent Town/State Deermit expires one y	Rental of claimer): ted as a te/DNR	Any futu 3-bedr permits	oom r may	nsions or de residence be requir	velopm e. Con ed.	ent w	ould red	quire a	addition	nal permitt Depart	ing.	
Condition(s	c) Short Term I (Disc s): To be rent Town/Stat	Rental of claimer): ted as a te/DNR	Any futu 3-bedr permits	oom r may	nsions or de residence be requir	velopm e. Con ed.	ent w	ould red	quire a	addition lealth	Depart Tracy	ing. ment for peri	nits.
Condition(s NOTE: This p work Chan	c) Short Term I (Disconsist): To be rent Town/State permit expires one yor land use has not ges in plans or specific	Rental celaimer): ted as a te/DNR vear from to begun.	Any future 3-bedre permits date of issueshall not be	coom residence if the made we	residence be require the authorized	velopm e. Con ed. d constr	ent w	could recount	quire a	addition lealth	Depart Tracy	ment for peri	nits.
Condition(s NOTE: This p work Chan This p	c) Short Term I (Discount) (Rental of claimer): ted as a se/DNR of cear from the degun.	Any future 3-bedre permits date of issues that any of the second shall not be a first any of the	room romay uance if the made whe applice	residence be require the authorized without obtain	velopm e. Con ed. d constr	ent w	could recount	quire a	addition lealth	Tracy	ment for peri	nits.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

JUN 15 2022

Bayfield Co. Planning and Zoning Agency Permit #: 22 - 0119

Date: 7 - 27 - 2020

Amount Paid: 135 7 - 12 - 22

Refund: 100 7 - 12 - 22

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department

Checks are made payable to: Bayfield County Zoning Department.									
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)									
TYPE OF PERMIT R	REQUESTED +> X LANE			IVY 🗆 CO	NDITIONAL US	E SPECIAL	USE 🗆 B	.O.A. 🗆 OTHE	
Owner's Name:	+ KARIN P. JEA	Mailing	Address:	1011.05	DD 0	ity/State/Zip:	-	Tele	phone: HOME
Address of Property	MITH LAKE RD	City	//State/Zip:		5487	ELM GROU	E WI	53122	2-860-8842 Phone:
Email: (print clear					2486	3			262-
Contractor:			tor Phone:		Plumber:				20-6049 nber Phone:
KE	N MAROSE	608-	359-8		•	_		Plun	nber Phone:
Authorized Agent: Owner(s))	(Person Signing Application on behalt	f of Agent F	hone:		Agent Mailing Ac	Idress (include City	/State/Zip):		tten Authorization quired (for Agent)
PROJECT LOCATION	egal Description: (Use Tax Sta		ID#	1205	5		Recorded	Document: (Showin	ng Ownership)
1/4,	1/4 Gov't Lot 1	Lot(s) CSM	Vol & Page	CSM Doc	# Lot(s)	# Block #	Subdivisio	n:	
Section <u>02</u>	, Township 44 N, Ran	ge <u>09</u> W	Town	of: BAF	RNES		Lot Size	X 1500' A	creage 10
☐ Is Property/Land within 300 feet of River, Stream (incl. Creek or Landward side of Floodplain? If yes—cont I			escontir nd or Flow	iue →	Distance Structure is from Shoreline :			Are Wetlands Present? Ves	
☐ Non- Shoreland		If	escontin	ue →		26	O feet	XNo	×No
Value at Time of Completion * include donated time & material	Project	Project # of Stories	Pro Found	The second secon	Total # of bedrooms on property	ls ls	on the pro	y System(s)	Type of Water on property
	☐ New Construction	☐ 1-Story	☐ Base	ment	□ 1	☐ Municipal			□ City
s 45,000.	☐ Addition/Alteration	☐ 1-Story + Loft	□ Four	dation	□ 2	□ (New) San		cify Type:	₩well
	☐ Conversion	□ 2-Story	□ Slab		□ 3	X Sanitary (I		ecify Type:	
	☐ Relocate (existing bldg)				X RV			ulted (min 200 g	allon)
	☐ Run a Business on		U:	se	☐ None	☐ Portable (
- 1	Property		☐ Year Round ☐ Compost Toilet						
	X GARAGE	l l	K SL	AB_		□ None			
Existing Structure: (if addition, alteration or business is being applied for) Length: Width: Height:									
Description 1 of the state of t						10'			
					-0			Height.	10
Proposed Use ✓ Proposed Structure Dimensions Square									

Proposed Use	1	Proposed Structure	Dir	mensions	Square Footage
	X	Principal Structure (first structure on property)	(X)	
		Residence (i.e. cabin, hunting shack, etc.)	(x)	
X Residential Use		with Loft	(x)	-
A Hosiacitiai osc		with a Porch	(x)	
		with (2 nd) Porch	(x)	
		with a Deck	(x)	
☐ Commercial Use		with (2 nd) Deck	(x)	-
- commercial ose		with Attached Garage	(,	X)	F .
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(. 4	x)	i -
		Mobile Home (manufactured date)	(x)	
☐ Municipal Use		Addition/Alteration (explain)	(x)	
	×	Accessory Building (explain)GARAGE 28' x 40' x 10'	128	x 40)	1120

APPLICANT - PLEASE COMPLETE PLOT PLAN

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of:(2) Show / Indicate:

Proposed Construction North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(3) Show Location of (*):

(*) **Driveway** \underline{and} (*) **Frontage Road** (Name Frontage Road)

(4) Show:

All Existing Structures on your Property

(5) Show:(6) Show any (*):

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

PLEASE SEE ATTACHED PRAWING.

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description Setback Measurements			Description		
-	Feet		Setback from the lake (ordinary high-water mark)	260	Feet
62.5	Feet		, , , , , , , , , , , , , , , , , , , ,		Feet
			Setback from the Bank or Bluff		Feet
260	Feet				
525	Feet		Setback from Wetland		Feet
40	Feet		20% Slope Area on the property	☐ Yes	₽ No
210	Feet		Elevation of Floodplain		Feet
			N .	6.0	
70	Feet	- 1	Setback to Wel!	p/19	Feet
50	Feet	1			
	Feet				
	\$25 260 525 40 210	Feet 525 Feet 260 Feet 525 Feet 70 Feet 70 Feet 70 Feet 70 Feet 70 Feet	Neasurements	Description Description	Measurements Feet Setback from the Lake (ordinary high-water mark) 525 Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff 260 Feet Setback from Wetland YO Feet 20% Slope Area on the property I lo Feet Setback to Well 70 Feet Setback to Well

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

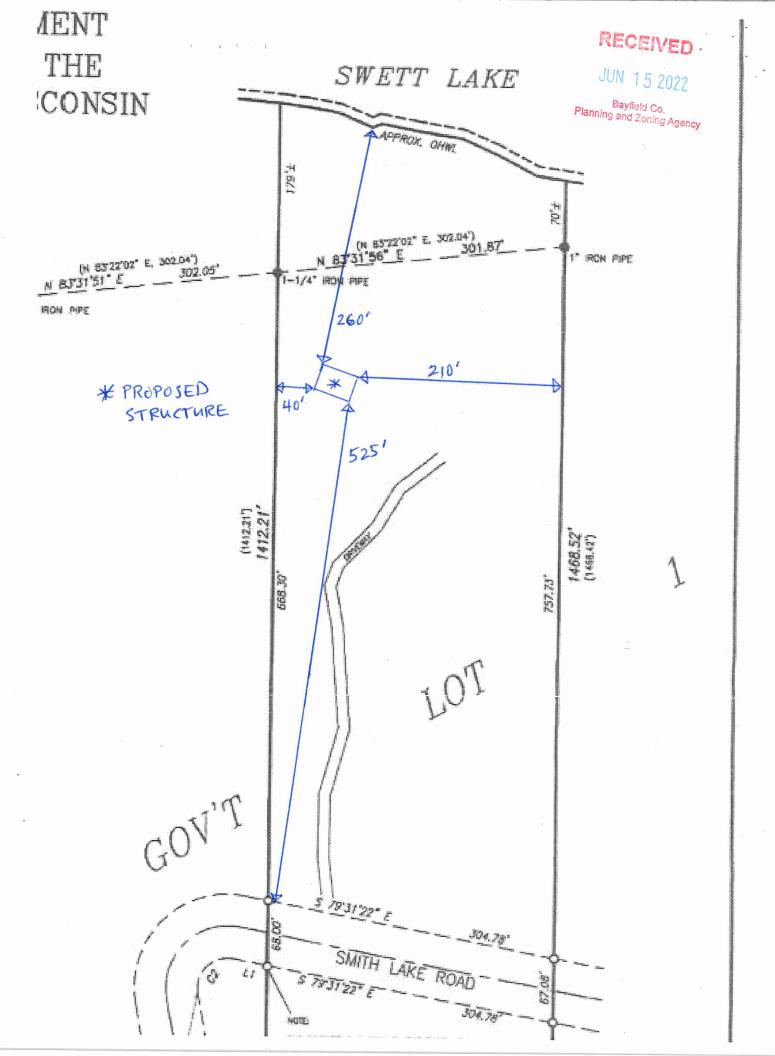
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resource center (715) 685-2900.

Issuance Information (County Use Only) Sanita		Sanitary Number:		# of bedrooms:		Sanitary Date:	Sanitary Date:		
Permit Denied (Date): Reason fo									
Permit #: 22 - 0169	Permit Date:	7-	27-202	a	All Marie				
Is Parcel a Sub-Standard Lot Searcel in Common Ownership Yes (Fused) Is Structure Non-Conforming Yes	f Record) Contiguous Lot(s))	□ No □ No □ No	Mitigation Required Mitigation Attached	☐ Yes ☐ Yes	⊟No □No	Affidavit Required Affidavit Attached	☐ Yes ☐ Yes	No No	
Granted by Variance (B.O.A.)			Previously Granted by Variance (B.O.A.)						



Bayfield County, WI



		* * * * * * * * * * * * * * * * * * *



Bayfield County Impervious Surface Calculations

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-132(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

Property Owner(s):							
DANIEL P. C	+ KARIN	P.	JEATE	RAN			
Mailing Address: 1625 BERKHIRE DR.			erty Address	5830	SMI	TH LAKE	RD.
ELM GROVE WI 53122						NI 5487	
Legal Description:		Secti	on, Township, I	Range			•
1/4,	1/4,	Sec_	02	Townshi	p	44	_N, Range <u>09</u> W
Authorized Agent/Contractor			Gov't Lot	Lot#		CSM#	Vol & Page
			1		7 .		
Lot(s)# Block(s)#	Subdivision				Town o	f:	
,					·	BARNES	
Parcel ID # (PIN #)			Tax ID#		Date:	. 1	
04-004-2-44-09-02	10000	1205	-	1	6/13/2	2	

Impervious Surface: An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious.

Calculation of Impervious Surface: Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

Impervious Surface Standard: Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

Existing Impervious Surfaces: For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- a. Maintenance and repair of all impervious surfaces:
- b. Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;
- c. Relocation or modification of existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.

-		

Impervious Surface Item

Dimension

Area (Square Footage)

Existing House						
Existing Accessory Building/Garage						
Existing Sidewalk(s), Patio(s) & Deck(s)						
Existing Covered Porch(es), Driveway & Other Structures		g				
Proposed Addition/House						
Proposed Accessory Building/Garage	28' × 40'	1	120			
Proposed Sidewalk(s) & Patio(s)						
Proposed Covered Porch(es) & Deck(s)						
Proposed Driveway —						
Proposed Other Structures	***					
Total:						
a. Total square footage of lot: _	300' x 1500' = 450,	000				
b. Total impervious surface area	1120					
c. Percentage of impervious surface area: 100 x (b)/a =						
If the proposed impervious surface area is greater than 15% mitigation is required.						
Total square footage of additional impervious surface allowed: @ 15% 67,500 @ 30% 135,000						
Issuance Information (County Use Only)			Date of Inspection: 7/12/22			
Inspection Record: Zenting Time of the state of the stat						

Issuance Information (County Use Only)	Date of Inspection: 7/12/22
Inspection Record:	6/7-4
The state of the s	Zoning Direct
12t STrucTURE	Labes Caroffication
Condition(s):	
	Stormwater Management Plan Required:
	☐ Yes ☐ No
10	
Signature of Inspector:	Date of Approval:

u/forms/impervioussurface Created: May 2012 (®Apr 2016; Sept 2020)

Proofed by: _____

Real Estate Bayfield County Property Listing

Today's Date: 7/13/2022

Property Status: Current

Created On: 3/15/2006 1:14:44 PM

Description

Updated: 10/21/2020

Updated: 3/15/2006

347-160

Tax ID:

1205

PIN: Legacy PIN: 04-004-2-44-09-02-1 05-001-40000

Map ID:

Municipality:

(004) TOWN OF BARNES S02 T44N R09W

004104107000

STR: Description:

PAR IN LOT 1 IN DOC 2020R- 584796

345C

Recorded Acres: Calculated Acres:

10.000 10.782 Lottery Claims: 0

First Dollar:

No

Zoning:

(R-3) Residential-3

ESN: 104

M	а	2	
w	п	7	
٠,	æ	•	

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
004	TOWN OF BARNES
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE

(in	
9	Reco

Recorded Documents

□ WARRANTY DEED Date Recorded: 10/14/2020

2020R-584796

CONVERSION

Date Recorded:

Ownership

Updated: 10/21/2020

DANIEL P & KARIN D JEATRAN

ELM GROVE WI

Billing Address: DANIEL P & KARIN D

ELM GROVE WI 53122

JEATRAN 1625 BERKSHIRE DR **Mailing Address: DANIEL P & KARIN D JEATRAN**

1625 BERKSHIRE DR ELM GROVE WI 53122

Fite Address * indicates Private Road

5830 SMITH LAKE RD

BARNES 54873

Updated: 10/4/2016

	Property Assessment
202	22 Assessment Detail
Car	lo.

Code	Acres	Land	Imp.
G1-RESIDENTIAL	10.000	118,100	0

2-Year Comparison	2021	2022	Change
Land:	118,100	118,100	0.0%
Improved:	0	0	0.0%
Total:	118,100	118,100	0.0%

Property History

N/A

1/13-51/Hel pay 5 may

Sun 2		

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X (Shoreland)
SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0169		Issued To:	Daniel 8	k Karin Jea	tran						
Location:	Town of	¼ of Barnes		1/4	Section	2	Township	44	N.	Range	9	W.
PAR IN Gov't Lot		Lot	1	Block	Sı	ıbdivisio	on			IN DOC 20	020R-5	84796 345C

Residential Structure in R-3 zoning district

For: Accessory: [1-Story]; Garage (28' x 40') = 1120 sq. ft.] Height of 10'

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must meet and maintain setbacks including eaves and overhangs. Not for Human Habitation or Sleeping Purposes. If Pressurized water enters structure a sanitary permit is required prior.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE:	This permit expires one year from date of issuance if the authorized construction	Tracy Pooler, AZA
	work or land use has not begun.	Authorized Issuing Official
	Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found	
	to have been misrepresented, erroneous, or incomplete.	July 27, 2022
	This permit may be void or revoked if any performance conditions are not	Date

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bay ald County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

JUN 10 2022

Bayfield Co.
Planning and Zoning Age

Permit #: Date: BYS RES ACC BLOG BIO IMP SUR! Amount Paid: Other: Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

DO NOT START CON				Department. HAVE BEEN ISSUED TO	APPLICANT.	Original	Application N	//UST be submit	ted FII	L OUT IN INK	(NO P	ENCIL)
TYPE OF PERMIT RE	EQUESTED	→ →	> LAND	USE SANITA			NDITIONAL US		Facility		HER	
Owner's Name:	- W/1	11	Corne	Mailin	g Address:	Δ.	C	ity/State/Zip:	03E - 1		elephone	:
Address of Property:	> 1/	VITC	helle		35 Land	Kd	EY	naple, 1	DIS	4854		
54755		ber	rwolf		Sarnes	WIT	5487	3		1 22	ell Phone	
Email: (print clearly	()				/	00 /	0/0/			7	5-29	2-3677
Contractor:	Torag	my o	yand	Contra	ctor Phone:	1	lumber:			P	lumber P	hone:
	erom				139-6245						idilibei r	none.
Authorized Agent: (F Owner(s))	Person Signi	ng Applica	ation on behalf	of Agent	Phone:	,	Agent Mailing Ad	Idress (include City	/State/Zip):			thorization
PROJECT		. 111 14		Ta	x ID#				Recorded	Document: (Sho		for Agent)
LOCATION	gal Descri	ption:	(Use Tax Stat	tement)	38	379			201	7 R 5	696	(7
1/0	1/1	Gov	't Lot	Lot(s) CSM	Vol & Page	SM Doc	# Lot(s) #	# Block #	Subdivisi	on:		
1/4,	_ 1/4			55					Pawner	Add to	Potan	actomic
Section	, Townsh	ip <u>44</u>	N, Rang	ge <u>R09</u> w	Town of:	Ba	rnes		Lot Size		Acreage	
	☐ Is Prov	norty/La	and suithin 2	100 foot of River St							1.79	0
A STATE OF THE STA			ard side of F	00 feet of River, Str loodplain?	yescontinue -		Distance Struc	cture is from Sho	reline : feet	Is your Prope in Floodpla		Are Wetlands
X Shoreland	Is Prop	erty/La	nd within 1	.000 feet of Lake, Po	ond or Flowage		Distance Struc	cture is from Sho		Zone?		Present? Ves
	الساتا	7. 5	1,315	lf	yescontinue	→	Marie	70	feet	☐ Yes ※ No		XNo
☐ Non- Shoreland						4, 4						
Shoreland	17		2.1.	r cools			<u> </u>					
Value at Time						NA B	Total # of		What Ty	pe of		Type of
of Completion * include		Projec	t	Project	Project		bedrooms		er/Sanita	ry System(s)		Water
donated time				# of Stories	Foundatio	n	on			operty or		on
& material	New	Constru	uction	1-Story	☐ Basemer	.	property 1			e property?		property
	/			☐ 1-Story +		- 100	1	☐ Municipal ☐ (New) San		ecify Type:		☐ City
s -	□ Addit	ion/Alt	teration	Loft	☐ Foundat	ion	□ 2		, op.	, .,,,		Well
40,000	□ Conv	ersion		☐ 2-Story	Slab		□ 3	Sanitary (Exists) Sp	ecify Type:	BI	
7	☐ Reloc	ate (exi	sting bldg)							aulted (min 20		4 —
	☐ Run a	SE W			Use		□ None	□ Portable (o gallon)	1 1
4	Prope	erty	4	= 1	☐ Year Rou	ınd		☐ Compost		T ₂		1
				-,-		W		□ None				Τ,
				siness is being applie	ed for) Lengt	h:		Width:		Height	:	E1 = 1401
Proposed Const	ruction:	(overa	II dimension	ns)	Lengt	h:	24	Width: 2	.4	Height	13	6"
Proposed U	lso l	1			Droposod			4 4 4 7 1 1 1				Square
гторозей о	36				Proposed :		e		and Supply	Dimensions	100	Footage
1 1	- 11			Structure (first s					(X)	
			Resident	ce (i.e. cabin, hunt with Loft	ing snack, etc.,		(X)			
Residential	Use			with a Porch					1	X)	
	-, 4		_ '	with (2 nd) Pore	ch				i (Х)	
				with a Deck					(Χ)	
☐ Commercia	al Use			with (2 nd) Dec			1		(Х)	
			D 11	with Attached		Y ny			(Х		
100				ise w/ (□ sanitary,					es) (X)	
D Marianal I			Addition	lome (manufacture / Alteration (expla	in\				_ (X)	
☐ Municipal I	Use	X	Accessor	y Building (explain	1)	ar	200		- 1	4x 24		
			Accessor	y Building Addition	on/Alteration	(explain)			- 1	X 27		3/6
	- The state of the							- '	X	,		
7			□ Special Use: (explain) □ Conditional Use: (explain)							X	<u>, </u>	
100		Other: (explain)							X	1		
owner(s): (If there are Mult Authorized Agent	aty relying on able time for tiple Owne	this inform the purpose	ny accompanyin i all information nation I (we) am se of inspection on the Deed	All Owners must sign	examined by me (us) are and that it will be relie to this application. I (we note that are the nor letter(s) of au	d to the bed upon by B) consent to	st of my (our) knowle ayfield County in det o county officials char of must accompa	edge and belief it is true termining whether to is reged with administering y this application	, correct and c sue a permit. county ordina Da	1 / &	liability whi to the abov	Alexander of the second
(If you a	re signin	ng on be	ehalf of the	e owner(s) <mark>a lette</mark>	or of authorizat	ion mu		this application	1	1		

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of: (2) Show / Indicate:

Show Location of (*):

(3)

(4)

(5)

Proposed Construction

North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

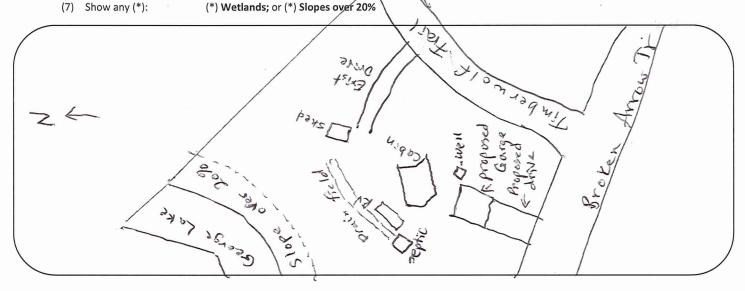
Show any (*): (6)

Show:

Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

Fill Out in Ink - NO PENCIL

(8) Setbacks: (measured to the closest point)

Setback Measureme	nts		Description		
82	Feet		Setback from the Lake (ordinary high-water mark)	170	Feet
	Feet		Setback from the River, Stream, Creek		Feet
			Setback from the Bank or Bluff	94	Feet
189	Feet			-	4
49	Feet		Setback from Wetland		Feet
42	Feet		20% Slope Area on the property	 ¥Yes	□.No
#30	Feet		Elevation of Floodplain		Feet
40	Feet		Setback to Well	5	Feet
56	Feet				
	Feet				
	82 189 49 42	Measurements ### Feet #### Feet ##################################	Measurements 82 Feet Feet 189 Feet 49 Feet 42 Feet 430 Feet 40 Feet 56 Feet	Measurements Setback from the Lake (ordinary high-water mark) Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff 189 Feet Setback from Wetland 49 Feet 20% Slope Area on the property Elevation of Floodplain 40 Feet Setback to Well Setback to Well	Measurements Setback from the Lake (ordinary high-water mark) Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff Feet Setback from Wetland Feet Setback from Wetland Feet 20% Slope Area on the property Elevation of Floodplain Feet Setback to Well Feet Setback to Well

other previously surveyed corner or marked by a licensed surveyor at the owner's expense

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be ked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

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You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:				
Permit Denied (Date):	Reason for Denial:		mil- Long					
Permit #: 22-0174	Permit Date: 7—	28-202	2					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Reconforming Yes Yes	guous Lot(s)) / No	Mitigation Required Mitigation Attached		Affidavit Required ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No				
Granted by Variance (B.O.A.) Yes No Case #:		Previously Granted by	/ Variance (B.O.A.) Case	#:				
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ I		Were Property Lines Represented by Owner Was Property Surveyed Yes Yes						
Inspection Record: AV your Prain tie		1.		Zoning District (R-1) Lakes Classification (3)				
Date of Inspection: 7/7/22	Inspected by:	Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.) - Move RV & Structures 10ft from drainfield & 5ft from tank - Maintain Sattaches								
Signature of Inspector:	Gleeping - it	lucssuized un	Date of Approval 7/15/22					
Hold For Sanitary: Hold For TBA:	Hold For Affic	lavit: 🗆	Hold For Fees: 🗆					

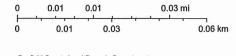
Bayfield County, WI



Rivers

Lakes

____ Town



Bayfield County Land Records Department

\$100

Bayfield County Impervious Surface Calculations

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

					•			
Property Owner(s):								
Randy and Michelle Cornell								
Mailing Address: 10935 Lund Rd F.	Prope	erty Address	5475	55 Timberu	solf Tr			
Maple, WI 54854				-5 Barnes,				
Legal Description:	Section	on, Township, I	Range		•			
1/4,1/4,		10	_	110-61				
Pawnee Add to Potawatom; Lot 55	Sec_	19	lownship .	75 ~	N, Range <u>© 9</u> W			
Authorized Agent/Contractor		Gov't Lot	Lot#	CSM#	Vol & Page			
Del Jerome								
Lot(s) # Block(s) # Subdivision			Т	own of:				
55 Pawnee Add to	Potav	catomi L	ots3	Barne	\$			
Parcel ID # (PIN #)		Tax ID#		Date:				
04-004-2-45-09-19-1 00-244-230	60	3879		5-2 - 2	2022.			

Impervious Surface: An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious.

Calculation of Impervious Surface: Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

Impervious Surface Standard: Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

Existing Impervious Surfaces: For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- a. Maintenance and repair of all impervious surfaces:
- b. Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;
- c. Relocation or modification of existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.

I	mnen	elloiv	Surfa	ce Item
Į	mperv	110us	Suria	ce nem

Dimension

Area (Square Footage)

Existing House	16 + 36	. 72	8		
Existing Accessory Building/Garage	8 x 12	90			
Existing Sidewalk(s), Patio(s) & (Deck(s))	18+36 10470	1288	- Zno		
Existing Covered Porchles), Driveway & Other Structures	8×36 103×14	78	8 1730		
Proposed Addition/House	,				
Proposed Accessory Building/Garage	24124	57	76		
Proposed Sidewalk(s) & Patio(s)					
Proposed Covered Porch(es) & Deck(s)					
Proposed Driveway	30' × 40'	120	00		
Proposed Other Structures					
FV trailer Existing) 8 + 27	21	6		
Total:		28	88 3746		
a. Total square footage of lot: _	65,340				
b. Total impervious surface area	,				
c. Percentage of impervious sur	,	5,7	3 %		
If the proposed impervious su	urface area is greater than 15% miṭiga	ation is requi	red.		
Total square footage of additional im	pervious surface allowed: @ 15	%	@ 30%		
Issuance Information (County Use Only)			Date of Inspection: 7/7/72		
Inspection Record:			Zoring Bisson:		
Condition(s):		400	Stormwater		
			Management Plan Required:		
			☐ Yes ☐ No		
,10			1		
Signature of Inspector:	7_		Date of Approval:		

u/forms/impervioussurface Created: May 2012 (®Apr 2016; Sept 2020)

Proofed by: _____

Real Estate Bayfield County Property Listing

Today's Date: 7/5/2022

Property Status: Current

Created On: 3/15/2006 1:14:52 PM

Description	
Description	

Updated: 9/1/2017

Tax ID: PIN:

3879

04-004-2-45-09-19-1 00-244-23000

Legacy PIN:

004130205000

Map ID:

Municipality:

(004) TOWN OF BARNES S19 T45N R09W

STR: Description:

PAWNEE ADD TO POTAWATOMI LOT 55

IN DOC 2017R-569617 2.670

Recorded Acres: Calculated Acres: Lottery Claims:

First Dollar:

Zoning:

ESN:

Yes	
(R-1)	Residential-1
104	

0

1.495

Tax Districts	Updated: 3/15/2006					
1	STATE					
04	COUNTY					
004	TOWN OF BARNES					
041491	SCHL-DRUMMOND					
001700	TECHNICAL COLLEGE					

- 6	20	
200	œ.	
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~9		-

Recorded Documents

Updated: 3/15/2006

WARRANTY DEED

2017R-569617 Date Recorded: 8/18/2017

CONVERSION

Date Recorded:

475281 786-194;831-467;831-

Ownership

Updated: 9/1/2017

RANDY S & MICHELLE A CORNELL

MAPLE WI

Billing Address: RANDY S & MICHELLE A CORNELL

10935 LUND RD EAST **MAPLE WI 54854**

Mailing Address: **RANDY S & MICHELLE A** CORNELL

10935 LUND RD EAST **MAPLE WI 54854**

Site Address * indicates Private Road

54755 TIMBERWOLF TRL **BARNES 54873**

Property Assessment	Updated: 3/25/2022					
2022 Assessment Detail						
Code	Acres	Land	Imp.			
G1-RESIDENTIAL	2.670	27,300	78,100			
2-Year Comparison	2021	2022	Change			
Land:	27,300	27,300	0.0%			
Improved:	55,300	78,100	41.2%			
Total:	82,600	105,400	27.6%			



Property History

N/A

TRY Praiatiet

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE – X (Shoreland)
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0174			Issued To:	Randy 8	& Michel	le Corne	II					
Location:	Town of	¼ Bar			1/4	Section	19	Township	45	N.	Range	9	W.
Gov't Lot DOC 2017R	-569617	L	ot	55	Block		Subdivisio	n PAWNE I	E ADD	ТО	POTAWA	MOTA	IN

Residential Structure in R-1 zoning district

For: Accessory: [1-Story]; Garage (24' x 24') = 576 sq. ft.] Height of 13'6"

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must meet and maintain setbacks including eaves and overhangs. Not for Human Habitation or Sleeping Purposes. If Pressurized water enters structure a sanitary permit is required prior.

Move RV & structures 10 ft from drainfield and 5 ft from tank.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE:	This permit expires one year from date of issuance if the authorized construction	Tracy Pooler, AZA
IOTE.	work or land use has not begun.	Tracy rooter, AZA
	work or land use has not begun.	Authorized Issuing Official
	Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found	
	to have been misrepresented, erroneous, or incomplete.	July 28, 2022
	This permit may be void or revoked if any performance conditions are not	Date
	completed or if any prohibitory conditions are violated.	

MIT: COMPLETED APPLICATION, TAX EMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

NOV 17 2021

Bayfield Co.
Planning and Zoning Agency

Permit #: 26	1-0171	
Date: 7-	-27-203	a la
Amount Paid:	#75 11-30 Res Ad	1 (Deck)
Other:		
Refund:	. · · · · · · · · · · · · · · · · · · ·	

INSTRUCTIONS: No permits will be issued until all fees are paid.

DO NOT START CO				100		O APP	LICANT.	Ori	igina	l Applic	ation <u>N</u>	MUST be su	ubmitt	ed FIL	L OUT IN I	NK (NO PE	NCIL)
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Owner's Name:		. 0	` L .	- 15	Mailir	_		_		- (City/State/Zip		<	PURUA	Tele	phone:	
Address of Propert	tv:	1 _			C	TY/St	S. Nate/Zip:	1)or	r3	SIKK	60 IL	akel	lebo	gan	millina	18	17-	0073
	556	∞R	00 60	LK Orio			K	ar	ne	1,25	16	548	73			Cell	Phone:	-10
Email: (print clear	rly) CS	Kor	SKI 00	7300	2 mc	17	MAT									715		007;
Contractor:				50,	Contr	actor	Phone:			Plumber	:						nber Ph	
Authorized Agent:	(Person Sigr	ing Applic	ation on behal	f of	Agent	t Phor	ne:			Agent M	ailing Ar	ddress (includ	do City/	State /7:n/.				
Owner(s))										r gene in		udiess (meide				Rec	quired (f	horization or Agent)
PROJECT LOCATION	egal Desci	ription:	(Use Tax Sta	tement)	13	ax ID#		55	50	13	1		√.	Recorded	Document: (Showin	g Owne	rship)
1/4,	1/4		/'t Lot	Lot(s)	CSM	Vol	& Page	_	/I Doc		Lot(s)	# Bloc	ck#	Subdivisio	n:			- 1
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Section	_ , Townsl	nip	N, Ran	ge	_ W		Town of	. (-	<u>3</u>	-rne	25			Lot Size		A	creage	010
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☐ Shoreland -			and within 1				continu		-					feet	in Flood Zone			Present?
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donated time & material				2013	ories	1	Tourida	LIOII		No. of Concession, Name of Street, or other Persons, Name of Street, or ot	on perty	3			perty <u>or</u> property?		-5 A	on proper
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	☐ Addi	tion/Al	teration	☐ 1-Stc	ry +		Found	ation		1	1			ary Spec	cify Type:			
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			Condition	nal Use: (e:	kplain) _									- (Х)		
1			Other: (e:	xplain)										(Х)		
I (we) declare that this (are) responsible for the result of Bayfield Couproperty at any reason Owner(s): (If there are Mu	nty relying on nable time for	this inform	ny accompanyin all information nation I (we) am se of inspection.	g information) I (we) am (are) (are) providing	has been e providing a ; in or with	examine and tha n this ap	ed by me (us) at it will be re application. I (and to telied upo we) con:	the bes on by Basent to	st of my (or ayfield Cou county off	ur) knowle unty in det ficials char	ermining whether rged with admini	is true, co er to issue istering co	orrect and core a permit. I (ept liabili ess to the		
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				e owner(s)	a lette	er of	authoriz	ation	mus	st accor	npany	(See Note be this application	elow)	Dat	e			
Address to send													.85	rchased the	Atta Copy of Ta property sen	x Sta		

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1)Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3)Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)

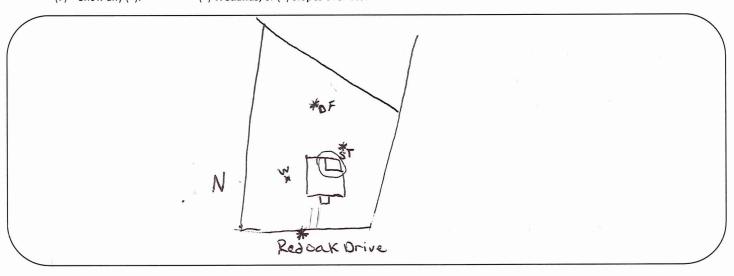
Fill Out in Ink - NO PENCIL

(4)Show:

All Existing Structures on your Property

Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5)(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6) Show any (*):

(*) Wetlands; or (*) Slopes over 20% Show any (*): (7)



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
			,	—
Setback from the Centerline of Platted Road	Feet		Setback from the Lake (ordinary high-water mark)	22 Det
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	49 Feet			
Setback from the South Lot Line	96 Feet		Setback from Wetland	6 72 Feet
Setback from the West Lot Line	176 Feet		20% Slope Area on the property	☐ Yes ☐ No
Setback from the East Lot Line	-122 Feet		Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	, 2 ? Feet		Setback to Well	Feet
Setback to Drain Field	Feet			
Setback to Privy (Portable, Composting)	Feet			
Prior to the placement or construction of a structure within ten (10) for	et of the minimum required setback.	the bo	oundary line from which the setback must be measured must be visible from on	e previously surveyed corner to the

usly surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: <u>ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.</u> The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 3	67578	# of bedrooms:	Sanitary Date: 5/23/0/				
Permit Denied (Date):	Reason for Denial:	AVIOLETIC						
Permit #: 22 - 017/	Permit Date: 7	27-2022	7					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of f	ntiguous Lot(s)) 🖒 No	Mitigation Required Mitigation Attached	Yes No	Affidavit Required Affidavit Attached Yes No				
Granted by Variance (B.O.A.) Yes No Case #:		Previously Granted by Yes No	y Variance (B.O.A.) Case	e #:				
	No	Were Property Line	es Represented by Owner Was Property Surveyed	Yes □ No Yes □ No				
Inspection Record:				Zoning District (P-/)				
		111		Lakes Classification ()(A)				
Date of Inspection: 7/1/2 2	Date of Re-Inspection:							
Condition(s): Town, Committee or Board Conditions			ched.)					
- Boild as propos	ed,	Mint 1						
- Build as proposed, - Get uoc Inspations it required								
Signature of Inspector:	le			Date of Approval: 7/14/21				
Hold For Sanitary: Hold For TBA:	Hold For Affi	davit: 🗆	Hold For Fees:					

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY - Existing (# 367578) SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Jason & Cindy Sikorski 22-0171 Issued To: No. Town of **Barnes** Location: 45 Range 9 W. $\frac{1}{4}$ of Section Township 1664 Subdivision CSM# Gov't Lot Lot Block IN V.10 P.9 IN DOC 2021R-586974

Residential Structure in R-1 zoning district For: Add/Alt: Deck (16' x 16') = 256 sq. ft.

Condition(s): A Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction (if applicable). Meet and maintain setbacks as approved including eaves and overhangs. Build as proposed.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler, AZA

Authorized Issuing Official

July 27, 2022

Date